

Allen County Genealogical Society of Indiana

Homesteaders Application



A.C.G.S.I Homesteaders
 P.O. BOX 12003
 Fort Wayne, IN 46862-2003

APPLICANT'S NAME: _____
 (as you want it to appear on the certificate: please print)

ADDRESS: _____ **CITY** _____ **STATE** _____ **ZIP** _____

ANCESTOR'S NAME: _____
 (as it will appear on the certificate)

Line of descent. List yourself in line 1. Proceed step by step to your pioneer ancestor. Do not skip any generation. Proof must be submitted for each generation. If needed, continue on the other side.

Name of ancestor	Year first proved in Allen Co., IN	Place of birth, state or country
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

It is my understanding that the material submitted with this application and pedigree chart will be given to the genealogy department of the Allen County Public Library to be included in their collection.

I do hereby affirm that the statements made in this application are true to the best of my knowledge.

Signature of applicant _____ Date _____